

Choosing a Career in Pediatrics

Welcome to the Department of Pediatrics! We are excited about your interest in a pediatric career and/or learning about career possibilities in pediatrics. This document is the companion to our Pediatric Specialty meeting where we discuss both careers in pediatrics, as well as the nuts and bolts of the application process. We know some students will not be able to attend that session or would like a written summary of what is discussed, so the following is a brief synopsis of the guidelines students might follow in planning their career.

If you are reading this material, you already have some interest in children and in their health care. However, you may still have reservations about a pediatric career and whether it is a good fit for you. This document is not intended to convince you; that will require time, reflection, thought, and most importantly, discussion with a faculty advisor who can help you discern what criteria are most important to you. Bear in mind, however, that a *career in pediatrics can be anything you want it to be*. We truly feel that no other specialty has a greater degree of flexibility in career path. A career as a generalist or subspecialist in an academic setting may be familiar to you, as it is primarily these individuals who have taught you during the past year. However, there are so many other options for you within the specialty of pediatrics.

Despite the commonly held opinion that a career in primary care pediatrics is nothing more than runny noses, sore throats, and camp/school physicals, a career in primary pediatrics can offer much more. If you plan your primary care career in a thoughtful and prospective manner, it can remain an academically and intellectually rewarding experience. For example, for over 20 years the Pediatric Practice Research Group (PPRG), which includes over 150 pediatricians in full-time private practice, has worked together to conduct research projects in their office settings. Many also serve as Lurie teaching attendings, ECMH preceptors, preceptors in the resident continuity clinic, or work with students and residents in their offices.

In addition, careers as specialists in the community setting are becoming more common in pediatrics, as are hospitalist and emergency medicine positions in both the academic and community settings. Pediatrics is characterized by multiple career options, attracting people who like working with children and their families, and who share a common personality trait of wanting their day-to-day existence to be fun and rewarding.

Advising

Regardless of whether you are sure about pediatrics or are uncertain if it will be your ultimate career choice, we recommend being assigned a pediatric advisor. Your advisor will be able to discuss where you are in this decision-making process and potentially what your future agenda (and rotations) should be. If you attend the Pediatric Specialty meeting, you will automatically be assigned an advisor. If you missed the meeting and would like to be assigned, please contact the Peds Meds Student Coordinators (pedsmedstudents@luriechildrens.org) and/or Dr. Koressel (lkoressel@luriechildrens.org) and we will set you up with a pediatric advisor.

We recommend meeting with your advisor in January/February to become better acquainted and to discuss the logistics for the remainder of your medical school career. If you are uncertain of your career choice but feel that pediatrics is a possibility, discuss your thoughts with an advisor, ask questions you might have, and receive guidance on what other resources are available to help answer them. You should also discuss scheduling pediatric electives and/or a sub-internship for your 4th year.

If you are certain pediatrics is for you, you should review your plans for senior class schedule with your advisor, as well as discuss timing of Step 2. You may also have some preliminary discussion of the residency application process.

Your Senior Schedule

Before your INITIAL advisor meeting, you should do two things:

- 1) determine scheduling of any remaining 3rd year clerkships
- 2) review the senior course catalog to make tentative choices for possible electives

You should attempt to strike a balance between inpatient and outpatient experiences as well as between pediatric and non-pediatric courses, with the goal of rounding out your education and concentrating on areas in which you feel there is room for continued growth. You do NOT need to only take pediatric medicine electives – use this time to expand your knowledge and experience beyond the field in which you will spend the rest of your career. You and your advisor can review the merits of any particular elective and discuss the advisability of spending an elective at some other institution.

You should set up your schedule so that you have an opportunity to get to know one or two pediatric faculty well so you can request letters of recommendation. The third-year rotation in pediatrics usually **does not** allow for getting to know individual faculty well enough to request letters. Common rotations that students will engage with faculty to receive letters of recommendations: 4-week pediatric electives, PICU, sub-internship. If applying to pediatrics, you need to complete AT LEAST one of these rotations in the beginning blocks of Phase 3 (Blocks 13-16) to allow ample time for faculty to write you a letter of recommendation.

Most students also utilize time in the beginning of their fourth year for dedicated Step 2 time. You should schedule at least a pediatric elective, the pediatric ICU clerkship, or your sub-internship prior to your MSPE submission – that means in one of the rotations that finishes BEFORE the end of August (Blocks 13-16). By having at least one experience, you will have encounters to talk about during your interview, grades to demonstrate your performance, and interactions with faculty to receive a letter of recommendation.

Remember: you also must allow enough time in your schedule for interviewing. Historically, interviews occurred from November through January (Blocks 19-21), although some programs begin interviewing in October and now ending earlier. We anticipate that interviews will stay virtual, though nothing has been finalized for the upcoming interview cycle. Most programs within pediatrics are attempting to take a more holistic approach to applications, which means the initial review can be more time-consuming and interview offers might be slightly later (~2 weeks AFTER applications can be reviewed). Students with more modest academic records (mostly pass grades, lower scores) may be offered interviews later in the application process and should keep January open in the event that interview slots open up later in the cycle.

You should not plan to interview during any required clerkship or the pediatric sub-internship. Electives in pediatrics are generally popular, and we often have trouble accommodating all the students who desire a specific elective, especially in the summer months. We request that, once your elective schedule has been confirmed, you consider it a firm commitment to take the elective. The sub-internship in pediatrics is also popular in the summer and early fall. *Everyone planning on going into pediatrics should sign up for the pediatric sub-internship, but it is not always necessary to have it completed prior to residency application. Discuss with your advisor.* Pediatric ICU is also recommended if available.

If you are deciding between pediatrics and another field, you should discuss with your advisor which sub-internship makes the most sense. We have students every year who end up choosing other specialties but still find the pediatric sub-internship a rewarding and worthwhile experience that prepares them for residency. Our sub-interns carry their own patients, have identical responsibilities as our interns and are supervised by the senior resident on their service, serving an integral role to the resident team. We will work closely with you if your plans change and therefore wish to cancel a previously confirmed elective or sub-

internship. Please understand that in doing so you have likely inconvenienced one or more other students who didn't get the elective or sub-internship they wanted.

Applying for Residency

Although you should be familiar with the catalog of residency programs and the FRIEDA computerized listing prepared by the Accreditation Council for Graduate Medical Education (ACGME), it does not discriminate which programs will be potentially appropriate for you, your interests, and your talents. In general, the most appropriate way to begin constructing a list of residency programs is to select a geographic area or areas in which you would like to live. Once you have done this and have reviewed the list of programs in the ACGME catalog, via the FRIEDA computerized listings, or on each program's web site, you should sit down with your advisor and discuss your interests.

Your advisor and other faculty members can help sort out the strengths and weaknesses of a given program, or a given type of program (general hospital vs. children's hospital, university based vs. community based, etc.) As you discuss your residency options with your advisor, he/she will need to understand a bit more about your interests, your abilities, and your academic record.

You should be prepared to discuss and show:

- your grades
- the narrative comments of your performance in your M3 year
- your Step board scores
- other factors which might influence how your candidacy would be viewed by a residency selection committee (eg time off, couples match, unique circumstances)

The more your advisor knows about you, the better he/she can advise you on your competitiveness for a particular program, as well as help you find an appropriate program for your educational and personal needs. There are also other resources that we will be able to review with you during these meetings in identifying the right programs for each student. The goal of this discussion, which should occur in late spring or early summer of this year, is to identify a list of 25-30 programs on which you should do more background research. If you are couples matching, you will likely need to include more on this preliminary list.

Sometime over the summer, you will begin narrowing your list of programs down to a more workable number—~20 programs would be typical number unless you have had academic difficulty (failed courses), failures on exams, or you are couples matching. You should include programs at which you have a reasonable chance of success, more accessible programs, and a few reaches (where you may not obtain interviews). You will also be able to choose a certain number of programs to “signal” (in years past, it has been 5 pediatric programs). Generally, we recommend 1-2 signals being for “dream programs” and the other 3-4 signals being reserved for accessible programs you are interested in. You can also select up to three geographical preferences. We recommend discussing these decisions with your advisor as you narrow your list of programs to apply to.

The number of programs on your "final" interview list will depend on how much time you have for interviewing, how broad your geographic interests are, the perceptions you and your advisor have about your competitiveness, as well as whether you are couples matching.

Letters of Recommendation

The application form for most interviews asks for three or four letters of recommendation. The pediatric departmental/chair letter written by your advisor counts as one of these. Therefore, you will need at least

two other faculty who will write letters for you. If you have planned your senior year appropriately, you should have at least one member of the Department of Pediatrics with whom you have worked closely on an elective, the sub-internship, or the pediatric ICU to write a letter for you.

At Northwestern, our “Departmental Letter” is a combined letter from your Pediatrics Career Advisor and the Chairman of the Department. Your advisor writes this letter and the chair comments and co-signs it after meeting you. All students typically meet with the chair in August or early September before the advisor/chairman’s letter is signed. In advance of this meeting, you need to provide a copy of personal statement and CV to the chair’s office. Dr. Estella Alonso is our Interim Chair. We will inform you on how to schedule these meetings in the summer. There are some programs (but not all) that will require a Chair Letter. However, because our career advisors know you all well, receive more holistic information about your performance, and write a letter detailing/summarizing all of your strengths, we find this letter to be a strong asset in your pediatrics residency application portfolio, regardless of if the program requires a “Departmental or Chair Letter”.

Additional letters – you should have at least one letter that can speak to your *clinical* abilities (ex sub-I, PICU, elective) and then other sources of letters can include: your ECMH preceptor, your AOSC mentor, a research advisor, or any other faculty member who has worked with you closely in 3rd year. *Not every letter needs to be from a pediatrician.*

Personal Statement/CV

The personal statement should describe something about yourself that will help a program "know" you a bit before the interview. Try to avoid the "I have always wanted to be a pediatrician because..."; it gets old very fast if you read hundreds of personal statements each year. Writing a sub-par personal statement might not hurt your chances, but it is a missed opportunity to give a program insight into your interests, background, research, goals, or avocations. This personal statement is a place for you to *use your own voice* to describe your strengths, your interests, and what you bring to their program. Use your CV to provide demographic information, honors, publications and/or research, outside interests, etc. Proofread everything for typos or misspellings; such errors reflect poorly on the applicant. ***Big take aways: keep it personal, less than 1 page, interesting, and consistent.*** Have it speak to who *you* are.

Within ERAS, your application will now be limited to TEN experiences, of which you can identify three of those as the most meaningful. You are also able to choose (up to 3) geographical preferences and signaling for up to 5 programs in the country (details could change for upcoming application cycle). These meaningful experiences should be taken from your CV and the goal is to highlight certain strengths/experiences that tell the story of who you are.

Timeline for submitting to ERAS

Plan to have all your applications materials in ERAS by mid-September. Programs were not allowed to begin downloading applications last year until the very end of September. When these dates are finalized for your application year, we will review them and remind you of upcoming deadlines. There is no benefit to having your application completed any sooner since all programs can begin downloading on the same date and cannot offer interviews until that happens. You should ensure all letters of recommendation are submitted into the Portal by mid-September as well. The timing of interview offers has been variable in the last several years. It has been the recommendation from the APPD and COMSEP (pediatric UME and GME organizations) that no interview offers are sent out in pediatrics until two weeks after applications can be downloaded. Typically, interviews are scheduled for the end of October through early to mid-January. If you are offered an

interview, respond as soon as you are able (most programs will give you 48 hours) to schedule, because the dates you prefer may go quickly at popular programs.

If you are initially wait-listed for an interview, politely emailing/calling to follow up every couple of weeks will sometimes result in an interview ultimately being offered. There is no surer way to ruin your chances than being demanding and/or condescending to the coordinator responsible for interviews. ***If you find you have too many interviews (15+), discuss with your advisor and consider eliminating programs you are less interested in. Most students interview at ~12-15 programs.*** Make sure you still have a range of programs (in terms of competitiveness) on your list.

Interview Information

If you have not received at least 8 interviews, or are turned down at institutions where your advisor thought you should have a reasonable chance of success, be sure to notify Dr. Koressel and your faculty advisor. We are sometimes able to assist you with getting your foot in the door to the interview process if we feel you are competitive for the program, and you have a strong interest in the program.

Try to spread out interviews; doing even three or four interviews in five can be exhausting, and you will quickly lose your objectivity. Remember, interview slots are limited, and the earlier you schedule your interview the more flexible your arrangements will be.

At most programs, you will meet virtually with one or two faculty, a residency program director and/or the department chairman, and the residents. Most programs interview during the week, although some only interview on Saturdays. You should discuss the interview process with your advisor and obtain suggestions he/she has concerning it. In general, be honest, judiciously candid, and prepared to discuss anything that appears in your application.

You will be expected to ask questions about the program; be prepared with a list of reasonable questions and always have a "reserve" question to use if necessary. Avoid directing questions about salary, call schedules, or benefits to faculty, program directors, or department chairs. These questions usually are answered in the information sent to you or can be obtained in discussion with the residents. Questions about programmatic development, strengths vs. weaknesses, etc., are appropriate. Be prepared, however, to field the strength/weakness questions yourself, particularly if you ask it about the program. Do not take notes, yawn, fall asleep, or slurp your coffee. If you feel compelled to write things down, do so between interviews or at the end of the day. Your interviewer might assume that you cannot think on your feet, or function independently without a crutch, if you furiously record notes during the day (or constantly refer to a written list of questions to ask).

Often the most useful information you obtain during an interview will be from the residents. Ideally you should meet with senior residents (PGY2's) as well as interns; the PGY2's will be your supervisors the following year and have a broader perspective on the program. If you are not given the opportunity to meet with many of them, feel free to seek them out yourself after the scheduled interview period is over. Most programs will have some sort of informational session, casual virtual gathering, or scheduled virtual activities (trivia, virtual happy hour, etc.), where you should have more time to interact with other interns and residents. It is nice to use this time to see how they interact with each other as well as what they say about the program.

Regrouping with your Advisor

Once you have finished interviewing at all potential programs, you are welcome again to review your experience with your advisor, who may be able to help sort out your likes and dislikes. It is perfectly appropriate (but DEFINITELY not required) to send a thank you email to each program or interviewer. Although many letters and e-mails get traded back and forth between applicants and programs during this time, they should not be misinterpreted to indicate assured acceptance to a program. Promises of "ranking highly" remain ambiguous; programs as well as applicants generally do not draw up their rank list until February. They have little ability upfront to indicate where you might be ranked. Similarly, a lack of response or "promises of ranking highly" might also not mean anything – plenty of programs make it their policy to limit communication and discussions about preference after the interview.

How the Match Works

Both the applicant and the program, in numerical order, rank their choices. If you interview at 15 programs, and wish to rank 12, you will enter on the NRMP computer a list of 12 programs ranked 1 through 12. If a program interviews 150 applicants, and wishes to rank 135 of them, they too will enter on the NRMP a list of applicants ranked 1 through 135. The computer then selects the highest rank for both the applicant and the program that is mutually acceptable. For example, if each program you rank has room for 10 residents. Program X, which you ranked highest, ranked you 30th. They match with their 10th resident at their 25th rank spot, so you did not obtain a residency in program X. However, although Program Y also ranked you 30th, they still had two resident slots open by the time they got to their 30th ranked applicant. You therefore match at Program Y. The couples match works much the same way, except that the couple, by contractual agreement, agrees to the highest possible ranked program for both members of the couple.

How should you set up your rank list of programs? You and your advisor should discuss this process, but *in general you should rank any program that you feel you will be happy in as a resident*. The nuances of your rank list should be discussed with your advisor. You should never plan on using the "SOAP" to secure a match spot.

We are here to support you through the residency application process. Although it may seem overwhelming at the moment, it is worth the investment of time, as your residency program choice will influence your career in medicine. Continue to discuss your plans with your advisor as the process unfolds. This person is your most important link, as he/she is someone who has done this before personally and has helped many other students. Be careful with rumors and unsolicited opinions you hear from classmates/interview circuit/student doctor network. Bounce issues off your advisor to be certain they are well founded. Use your advisor, as well as other faculty and residents, to make this process run as smoothly as possible. We in the Department of Pediatrics look forward to getting to know you over the coming year! Please feel free to contact me with questions or to request a pediatric advisor.

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